DMV Technician: Teo k	1BURZ		Position	or or	2	RZCHEC
Station: Dover	Date:	3/4/14	Time:		20	
Vehicle Make: Cnevy	Mode	1 BLAZER	,	Year		
GVWR: Fuel 7	Гуре: 4		ration Nu	mber	7014	9934
Auditor: Dosser			t / Overt			
				YES	NO	N/A
1. Did technician check vehicle	paper work and	verify VIN nu	mber?	س		
2. Was Emissions testing requir	ed?					
a) Was Emissions testing perf	ormed using OF	BD?			_	
b) Was Emissions testing perf	ormed using An	alyzer Probe?				
c) Was Emissions testing perf	ormed using Pa	ddle(s)?				
d) Was Emissions testing perf	ormed using Cli	ip?				
3. Was Catalytic Converter ins	pection required	1?				
a) Was Catalytic Converter in	spection perform	ned?				
4. Was Fuel Tank pressure testi	ng required?					
a) Was Fuel Tank pressure tes	ting performed?					
5. Was Fuel Cap pressure testing	g required?	-			ー	
a) Was Fuel Cap pressure testi	ng performed?					
6. Is this test a Re-check from a	prior failure?		,			
a) Which re-check test is being	g performed? 1/	(2) 3 (circle o	ne)			
b) If this is re-check #3, was re-	epair paperwork	verified for w	aiver?	_		
New Castle and Kent Counties	Only					
7. Was Two-Speed Idle testing re	equired?					
a) Was Two-Speed Idle testing	performed?					<u> </u>
-						
Sussex County Only		·				
8. Was Curb Idle testing require						
a) Was Curb Idle testing perform	rmed?					
Comment:						
Customen Din	Nor Have	PAPERNOLI	L Compe	EFED.	WAS	\$
INSTRUCTED BY	TECHNICIA	w To Fin	L OUT	HAPE	240	NK
AND KETURN.						
Lane Supervisor Signature:						1

DMV Technician: Syevie Vienes		//	Positio	p: Dor	2	
Station: DoveR	Date: 3/	4/14	Time:	12	102	_
Vehicle Make: Chavy	Model	YRAVERSE				94 200
GVWR: Fuel Type:	9		ration N			794
Auditor: Dosser		Cover	Overt	Scircle	e one)	
				YES	NO	N/A
1. Did technician check vehicle paper	work and v	erify VIN nu	mber?			
2. Was Emissions testing required?				<u>بر ا</u>		
a) Was Emissions testing performed	using OBI	0?				
b) Was Emissions testing performed	using Ana	lyzer Probe?			_	
c) Was Emissions testing performed	using Pade	ile(s)?			_	
d) Was Emissions testing performed	using Clip	?				
3. Was Catalytic Converter inspectio	n required?)				
a) Was Catalytic Converter inspection	on perform	ed?				
4. Was Fuel Tank pressure testing req	uired?				-	
a) Was Fuel Tank pressure testing pe			····			-
5. Was Fuel Cap pressure testing requ	ired?					
a) Was Fuel Cap pressure testing per	formed?					
6. Is this test a Re-check from a prior f					~	
a) Which re-check test is being perfo	ormed? 1	2 3 (circle or	ne)			
b) If this is re-check #3, was repair p	aperwork v	erified for w	aiver?			-
New Castle and Kent Counties Only						
7. Was Two-Speed Idle testing required	d?			-	-	
a) Was Two-Speed Idle testing perform	rmed?					
Sussex County Only						
3. Was Curb Idle testing required?						
a) Was Curb Idle testing performed?						
į.						
Comment:						
					_	
ane Supervisor Signature:						

DMV Technician: Ton De	45 " 1	Position	r: 1 or	2>	PECIVE
Station: Doven	Date: 3/4/19	Time:	1/::	50	
Vehicle Make: Dome	Model RAM		Year		
GVWR: Fuel Ty	ype: G Reg	istration Nu	ımber	C107	589
Auditor: Doccerr	E COT	ert / Overt	circle	one)	
	·				
			YES	NO	N/A
1. Did technician check vehicle p		number?			
2. Was Emissions testing require					
a) Was Emissions testing perfo			/		
b) Was Emissions testing perfo		e?			
c) Was Emissions testing perform					
d) Was Emissions testing perform					
3. Was Catalytic Converter insp					
 a) Was Catalytic Converter insp 	· · · · · · · · · · · · · · · · · · ·				
4. Was Fuel Tank pressure testin	g required?			-	
a) Was Fuel Tank pressure testing	ng performed?				
5. Was Fuel Cap pressure testing	required?				
a) Was Fuel Cap pressure testing	~ ^ 				
6. Is this test a Re-check from a p			~		
a) Which re-check test is being					
b) If this is re-check #3, was rep	pair paperwork verified for	waiver?			
New Castle and Kent Counties	Only				
7. Was Two-Speed Idle testing red		<u> </u>		-	
a) Was Two-Speed Idle testing p	performed?				
Sussex County Only					
8. Was Curb Idle testing required					
a) Was Curb Idle testing perform	ned?				
		· · · · · · · · · · · · · · · · · · ·		_ *	
Comment:					
	•	·			
Lane Supervisor Signature:					ĺ

DMV Technician: /MK WILKINS Position	n:(1 dr	2		
				
GVWR: Fuel Type: C Registration Number: 7C 470134 Auditor: Dossin (circle one)				
Auditor. Dosser	Circle	Onc		
	YES	NO	N/A	
1. Did technician check vehicle paper work and verify VIN number?	<u></u>		11//23	
2. Was Emissions testing required?				
a) Was Emissions testing performed using OBD?				
b) Was Emissions testing performed using Analyzer Probe?				
c) Was Emissions testing performed using Paddle(s)?				
d) Was Emissions testing performed using Clip?		_		
3. Was Catalytic Converter inspection required?				
a) Was Catalytic Converter inspection performed?				
4. Was Fuel Tank pressure testing required?				
a) Was Fuel Tank pressure testing performed?				
5. Was Fuel Cap pressure testing required?				
a) Was Fuel Cap pressure testing performed?				
6. Is this test a Re-check from a prior failure?				
a) Which re-check test is being performed? 1 2 3 (circle one)			<u> </u>	
b) If this is re-check #3, was repair paperwork verified for waiver?				
New Castle and Kent Counties Only				
7. Was Two-Speed Idle testing required?				
a) Was Two-Speed Idle testing performed?				
Sussex County Only				
8. Was Curb Idle testing required?				
a) Was Curb Idle testing performed?	1		<u></u>	
Comment				
Comment:				
Lane Supervisor Signature:				

* SEE NOTE +

DMV Lane Technician Observation Report

DMV Technician: Dave	Power	Position: 1	or 2	
Station: Dover	Date: 3/4/14	Time:		
Vehicle Make:	Model	Yea	r	
GVWR: Fuel	Type: Re	gistration Numb	er:	
Auditor: Dosser	Ci Ci	vert / Overty (cir	cle one)	<u> </u>
				—
		YE	S NO	N/A
1. Did technician check vehicl		N number?		
2. Was Emissions testing requ	ired?			
a) Was Emissions testing pe	rformed using OBD?			
b) Was Emissions testing pe		be?		
c) Was Emissions testing pe	rformed using Paddle(s)?			
d) Was Emissions testing pe	rformed using Clip?			
3. Was Catalytic Converter in	aspection required?			
 a) Was Catalytic Converter i 	inspection performed?			
4. Was Fuel Tank pressure tes	ting required?			
a) Was Fuel Tank pressure to	esting performed?			
5. Was Fuel Cap pressure testi	ing required?			
a) Was Fuel Cap pressure tes	ting performed?			
6. Is this test a Re-check from	a prior failure?			
a) Which re-check test is bei	ng performed? 1 2 3 (circ	cle one)		
b) If this is re-check #3, was	repair paperwork verified f	or waiver?		_
New Castle and Kent Countie	es Only			
7. Was Two-Speed Idle testing	required?			
a) Was Two-Speed Idle testing	g performed?			
Sussex County Only				
8. Was Curb Idle testing requi	red?			_
a) Was Curb Idle testing perf	formed?			
				·
Comment:				
OUT SICK FO	L AN UNDEFFAMINE	D Anount C	F TI	ac
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Lane Supervisor Signature:				